



**Family Information:**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

# Adults (Age 18+): \_\_\_\_\_ # Children (age 6-17): \_\_\_\_\_ # Children (5 and under): \_\_\_\_\_

**Trailer Information:**

Camper Type (Circle One)

Truck Camper / Pop Up / Travel Trailer / 5th Wheel / Motorhome / Park Model

Camper Year: \_\_\_\_\_ Camper Length: (including tongue) \_\_\_\_\_ # of Slide outs \_\_\_\_\_

**Note: While it is not our intent to continually force the replacement of trailers, we do request that new seasonal camping units be no older than 10 years old. Prior approval is required for older campers.**

**Camping Information:**

Have you camped at Shamrock Campground before? \_\_\_ Yes \_\_\_ No

How did you hear about Shamrock Campground? \_\_\_\_\_

Are you friends with or related to any Seasonal Campers at Shamrock Campground?

\_\_\_ Yes \_\_\_ No If yes, who? \_\_\_\_\_

Have you been a Seasonal Camper before? \_\_\_ Yes \_\_\_ No

If yes, where? \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

What other campgrounds have you camped at? \_\_\_\_\_

Have you ever been evicted from a campground? \_\_\_ Yes \_\_\_ No If yes, for what reason?

*All applications are subject to final approval by the management of Shamrock Campground. We reserve the right to decline any specific application. For both safety and appearance purposes, each RV is subject to final approval by Shamrock Campground.*

***Please complete application and return it to:  
Shamrock Campground, 391 West Street, Biddeford, ME 04005 OR  
shamrockcampground2017@gmail.com***